

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | RSD | | 3/1/10 |
| FORMALITY REVIEW | HLC | 712 | 04-25-01 |
| RESPONSE FORMALITY REVIEW | HLC | 1091 | 6-12-01 |
| | | 712 | 10-09-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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REST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

617
 10-9-01